- ,	Form	990		Ret	turn d	of Orga	nizatio	on Exempt fr	om	Inco	me Ta	X		OMB No. 154	5-0047
				Uı	nder Se	ction 501(c) except black), 527, or k lung be	4947(a)(1) of the In nefit trust or privat	ternal e foun	Rever dation	nue Code i)			<u> </u>	
Depa Inter	artment nai Rev	of the Treasury venue Service	► The c	organiza	tion mag	y have to u	se a copy	of this return to s	atisfy :	state r	eporting re	equire	ements.		
A	For t	he 2001 calen	dar year, d	or tax ye	ar begir	nning		, 2001,	and e	ending				, 20	
В	Check	if applicable:										D			
	A	ddress change	Please use IRS label	MF21			OR JO	URNALISM							
	N	ame change	or print or type.		BOX		670					E			
	In	itial return	See specific instruc-	LAIK	UAK 5	, CA 95	0628					L.,			
	L. Fi	nal return	tions.									F â	ccounting nethod:	Cash 2	Accrual
	A	mended return										L.	Other (sp	pecify) 🚩	
	A	pplication pending						(a)(1) nonexempt d Schedule A		H and I	are not appli	cable to	o Section 52	7 organizations.	(C)
				1 990 or			complete	u Scriedule A			Is this a grou	*			X No
G	Web	site: ► N/A									If 'yes,' enter				П.,
J	Orga	nization type				-		_		H (c)	Are all affilia (If 'no,' attac				∐ No
	(chec	k only one).	<u></u> ►		•	3 ∢ (ins		4947(a)(1) or	527	n (4)	•			-	
K	Chec	k here ►	if the organ	nization'	s gross	receipts ar	e normal	ly not more than	- 1		ls this a sepa			_	X No
	\$25,0 recei	000. The orga ved a Form 9	nization ne 90 Packao	eed not the	file a re mail it	turn with th	e IRS; bu	ut if the organizatio without financial da	n ata		Enter 4-di			1,100	A NO
	Som	e states requi	re a comp	lete retu	m.	Silouiu IIIC	a rotain	William City Co.	···			_		ation is not requir	ed
L	Gross	s receipts: Ad	d lines 6b.	8b. 9b.	and 10	b to line 12	▶ 502	. 963 .					•	0, 990-EZ, or 990-I	
Pa								ssets or Fund	Balar	nces	(see instru	uction	ns)		
	1	Contributions	s, gifts, gra	ants, and	d simila	r amounts r	received:								
	a	Direct public	support						1a		501	,741	<u>l .</u>		
	b	Indirect publ	ic support				 .		1 b						
	5	Government							1c	:			_		
	l "	Total (add lines la through 1c) (1 d	501	,741
	2	-						ontracts (from Par	•		•		2		
	3	-											3		
	5		-	•	-								5	1	<u>,222.</u>
	-								1	1			5		
								· · · · · · · · · · · · · · · · · · ·	_	+			\dashv		
	1		•					· · · · · · · · · · · · · · · · · · ·		1			6c		
ь	7	Other invest	-				mic cay.		• •				7		
R E V E		Gross amou		•				(A) Securities	Т	Π	(B) Othe	r			
	04	than invento						,	8a						
Ü	Ь	Less: cost or	r other bas	is and s	ales ex	penses			8b	1					
	С	Gain or (loss) (a	attach schedu	le)					8c	:					
	d	-			-		and (B)).						8d		
	9	Special even													
	a							of contributions	1	,					
	١.	•	•					• • • • • • • • • • • • • • • • • • • •		+			_i		
			•			• .				1			_		
				-		-		from line 9a)		i			9c		
	1			•						_			-	€.	
			-					ne 10b from line 10a)	10b	<u> </u>			10c		
	11					-	-	ile fob from fille foa)					11		
	12				-			and 11)					12	502	,963.
_	13												7	J02	, , , , , ,
EXPENSES	14												$\overline{}$		
Ë	15	-	_	-											
S	16	_	-												
Š	17	-				-							_	479	,303.
A	18							2)						-	
N S E E T T	19				-		-	73, column (A)).							
ŤĘ	20	Other change	es in net a	ssets or	fund ba	alances (att	tach expla	anation)					20		
_ s	21							18, 19, and 20)					21	-25	,883.
BA	A Foi	r Paperwork F	Reduction .	Act Noti	ce, see	the separat	te instruc	tions.		TEEAC	01/01 01/01	/02			

	990 (2001) WESTERN CENTER F				68-026	
ari	Statement of Functional Ex- required for section 501(c)(3) and	(penses (4) organiz	All organizations must ations and section 494	st complete column (A) 7(a)(1) nonexempt cha	Columns (B), (C), and ritable trusts but optiona	(D) are I for others.
L	o not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
2	Grants and allocations (att sch)					
	(cash \$	-				
3	non-cash \$)	22				
3 4	Specific assistance to individuals (att sch) Benefits paid to or for members (att sch) ,	_				
5	Compensation of officers, directors, etc		95.040.	72,000.	23,040.	
6	Other salaries and wages		33,0.0.1	4,146.	23,0101	
7	Pension plan contributions	_	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,
В	Other employee benefits		644.	644.	-	
9	Payroll taxes		8,307.	8,307.	1	
)	Professional fundraising fees		7,000.			7,000
ı	Accounting fees	31	16,075.	16,075.		
2	Legal fees	32	9,025.	9,025.		
3	Supplies	33	1,734.	1,734.		
ŧ	Telephone		5,671.	5,671.		
5	Postage and shipping	_	1,651.	1,251.	400.	
ŝ	Occupancy	36	17,600.	17,600.		
7	Equipment rental and maintenance	37	220.	220.		
В	Printing and publications	38	5,085.	5,085.		
9	Travel	39	103.	103.		
0	Conferences, conventions, and meetings	40	750.	750.		
1	Interest	41				
2	Depreciation, depletion, etc (attach schedule)	42	6,239.		6,239.	
3	Other expenses not covered above (itemize):					
a	SEE STATEMENT 1	43a	300,013.	300,013.		
b		43 b				
c		43 c				
d		43 d				
e		43 e				
4	Total functional expenses (add lines 22 - 43). Organizations completing columns (B) - (D), carry these totals to lines 13 - 15	44	479,303.	442,624.	29,679.,	7,000
nt	Costs. Check . If you are following			442,024.	23,013.,	7,00
2	ny joint costs from a combined education	al campaig		itation reported in (B) P	rogram services?	. ► 🗌 Yes 🛛 No
Υe	s,' enter (i) the aggregate amount of these	joint cost	s \$; (ii) the ar	nount allocated to progra	am services
_		ocated to	management and gene	eral \$; and (iv) the	amount allocated
	ndraising \$.					
****	III Statement of Program Ser					
	is the organization's primary exempt purp		EDUCATION -I		to the number of	Program Service Expens (Required for 501(c)(3) a
en	ganizations must describe their exempt puss served, publications issued, etc. Discussons & section 4947(a)(1) nonexempt charit	achievem	ents that are not meas	surable. (Section 501(c)	(3) & (4) organ-	(Required for 501(c)(3) at (4) organizations and 4947(a)(1) trusts; but optional for others.)
						optional for others.)
a	FURTHERENCE OF THE EDUCA	I TON O	L TWAESTICKLIN	E KEPOKIING IE	CUNTRACES VAD	
	JOURNALISM.					
				allocations \$	·:	442,624
			(Grants and	allocations)		442,62
				- -		
			(Grants and	allocations \$	<u> </u>	
•						
			(Grants and	allocations \$		
C						
				allocations \$)	
•	Other program services		(Grants and	allocations \$)	
f	Total of Program Service Expenses (sho	uld equal	line 44, column (B), pr	ogram services)	▶	442,624
AA			TEEA0102L 01/	/01/02		Form 990 (200

Page 3

Note:	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45 Cash – non-interest-bearing.	36,967.	45	43,814.
	46 Savings and temporary cash investments		46	
İ				••
	47 a Accounts receivable			
	b Less: allowance for doubtful accounts	1,399.	47c	
				•
	48 a Pledges receivable			
İ	b Less: allowance for doubtful accounts		48c	
	49 Grants receivable		49	
A S S E T S	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
E	51 a Other notes & loans receivable (attach sch)			
Š	b Less: allowance for doubtful accounts		51 c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	1,140.	53	
	54 Investments – securities (attach schedule) ▶ Cost FMV		54	
	55 a Investments - land, buildings, & equipment: basis. 55a			
	b Less: accumulated depreciation			
ŀ	(attach schedule)		55c	
	56 Investments — other (attach schedule)		56	
	57 a Land, buildings, and equipment: basis			
į	b Less: accumulated depreciation	26.244		20 021
	(attach schedule)STATEMENT. 2 57 b 22,230.	36,344.		28,921
	58 Other assets (describe ► SEE STATEMENT 3	1,815.	58	
-	59 Total assets (add lines 45 through 58) (must equal line 74)	77,665. 17,393.	59	
.	60 Accounts payable and accrued expenses	17,333.	60	
L-AB-L-T-	61 Grants payable		62	<u></u>
ĝ	62 Deferred revenue.		63	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		64a	
†	64a Tax-exempt bond liabilities (attach schedule)b Mortgages and other notes payable (attach schedule)	85,000.		79,000
E	65 Other liabilities (describe ►. SEE STATEMENT 4).	24,815.		8,425
3	66 Total liabilities (add lines 60 through 65)	127,208.	66	100,433
	Organizations that follow SFAS 117, check here ► and complete lines 67	121,200.	-	100,433
N.	through 69 and lines 73 and 74.			
	67 Unrestricted		67	
ŝ	68 Temporarily restricted.	- ME WITH	68	
ASSET S	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ► X and complete lines	· · · · · · · · · · · · · · · · · · ·		
R	70 through 74.			
P OZO	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
Ä	72 Retained earnings, endowment, accumulated income, or other funds	-49,543.	72	<u>-25,883</u>
BALANCES	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through			
Ę	72; column (A) must equal line 19 and column (B) must equal line 21)	-49,543.	73	- 25,883
١	74 Total liabilities and net assets/fund balances (add lines 56 and 73)	77 665	74	

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

Form	1990 (2001) WESTERN CENTER F	OR JOURNALISM		68-0260	052 Page 4
E	TIV-A Reconciliation of Revenue Financial Statements with per Return (See instruction	ue per Audited th Revenue	Part IV-B Reconcilia Financial per Return	Statements with E	per Audited xpenses
a	Total revenue, gains, and other support per audited financial statements	a 502,963.	a Total expenses and financial statements	losses per audited	479,303.
Þ	Amounts included on line a but not on line 12, Form 990:		b Amounts included or on line 17, Form 990	n line a but not	
(1)	Net unrealized gains on investments \$		(1) Donated serv- ices and use of facilities \$		
(2)	Donated services and use of facilities \$		(2) Prior year adjust- ments reported on line 20, Form 990 \$		
(3)	Recoveries of prior year grants \$		(3) Losses reported on line 20, Form 990 \$		
(4)	Other (specify):		(4) Other (specify):		
	<u>'</u> \$	8.865.66	s	;	
	Add amounts on lines (1) through (4) .	b	Add amounts on lines (1)		
c	Line a minus line b.	c 502,963.	c Line a minus line b.	► с	479,303.
d	Amounts included on line 12, Form 990 but not on line a:		d Amounts included or Form 990 but not on	n line 17, line a:	
(1)	Investment expenses not included on line		(1) Investment expenses not included on line		
	6b, Form 990 \$		6b, Form 990 \$	5	
(2)	Other (specify):		(2) Other (specify):		
	s		9	<u> </u>	
	Add amounts on lines (1) and (2)	d	Add amounts on line	es (1) and (2) 🕨 <u>d</u>	
e	Total revenue per line 12, Form 990 (line c plus line d)	e 502,963.	e Total expenses per 990 (line c plus line	line 17, Form b e	479, 303.
Par	List of Officers, Directors	, Trustees, and Key I	Employees (List each or	ne even if not compensa	al
	(A) Name and address	(B) Title and average ho per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation	
SEE	STATEMENT 5				
			95,040.	0.	0.
		_			_
		_			
		-		`	
		_			
	. <u>-</u>				
75	Did any officer, director, trustee, or kethan \$100,000 from your organization \$10,000 was provided by the related of	and all related organizations organizations?	ons, of which more than	-	Yes X No
BAA	If 'Yes,' attach schedule - see instruct		ML 10/18/01		Form 990 (2001)

Form	990 (2001) WESTERN CENTER FOR JOURNALISM	68-0260052	2	Page 5
Par	VI Other Information (See specific instructions.)			Yes No
76	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		76	Х
77	Were any changes made in the organizing or governing documents but not reported to the IRS	?	77	
	If 'Yes,' attach a conformed copy of the changes.			
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year $\frac{1}{2}$	covered by this return?.	78a	Α.
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	j	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the			
	year? If 'Yes,' attach a statement		79	<u> </u>
	Is the organization related (other than by association with a statewide or nationwide organization membership, governing bodies, trustees, officers, etc, to any other exempt or nonexempt organization.	on) through common inization?	80 a	х
b	If 'Yes,' enter the name of the organization WORLDNETDAILY.COM			
	and check whether it is ex	· , 🗀 ·		
	Enter direct or indirect political expenditures. See line 81 instructions			
t	Did the organization file Form 1120-POL for this year?	•••	81 b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities a substantially less than fair rental value?	at no charge or at	82a	X
ŧ	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption	applications?	83a	X
	Did the organization comply with the disclosure requirements relating to quid pro quo contribut			
84 a	Did the organization solicit any contributions or gifts that were not tax deductible? \dots	• • • • • • •	84a	X
t	If 'Yes,' did the organization include with every solicitation an express statement that such connot tax deductible?	tributions or gifts were	84b	N.
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?.	•	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		85 b	1.
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the waiver for proxy tax owed for the prior year.	organization received a		
•	Dues, assessments, and similar amounts from members	85c N/A		
•	Section 162(e) lobbying and political expenditures	85d N/A		
	Aggregate nondeductible amount of Section 6033(e)(1)(A) dues notices			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f N/A		
	Does the organization elect to pay the Section 6033(e) tax on the amount on line 85f?		85 g	N/A
ŀ	If Section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasona dues allocable to nondeductible lobbying and political expenditures for the following tax year?	able estimate of	85h	N A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on			
	line 12	86a N/A		
t	The state of the s	86b		
87		87 a		
	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) At any time during the year, did the organization own a 50% or greater interest in a taxable co	87b N/A		
	or an entity disregarded as separate from the organization under Regulations Sections 301.770 If 'Yes,' complete Part IX	01-2 and 301.7701-3?	88	
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year und			
	Section 4911 ► 0. ; Section 4912 ► 0. ; Section 49			
ŀ	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any Section 4958 excess during the year or did it become aware of an excess benefit transaction from a prior year? If "explaining each transaction	s benefit transaction Yes,' attach a statement	89 b	x
•	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under Sections 4912, 4955, and 4958.	·		0.
	Enter: Amount of tax on line 89c, above, reimbursed by the organization			0.
	CAL TEACHTA			
	Number of employees employed in the pay period that includes March 12, 2001 (see instruction	ns)	90 b	3
	The books are in care of ► JOHN M. ROUX Telephone num)8	
	Located at ► 3620 AMERICAN RIVER DRIVE, SUITE 260	ZIP + 4 ► 95864	1	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check h	ere	N/	A►∐
_	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 92		N/A
BAA			Forn	n 990 (2001)

N.A.	-	Unrelated				
note: E otherw	Enter gross amounts unless ise indicated.	(A)	business income (B)	Excluded by s	section 512, 513, or 514	- (E)
	Program service revenue:	Business code	Amount	(C) Exclusion code	(D) Amount	Related or exem function income
a		1 1				Tambalan ancom
b						1
c.						
d _.				 		
e_					.,	
f	Medicare/Medicaid payments			 		
gi	Fees & contracts from government agencies					-
94 1	Membership dues and assessments.					
95 I	Interest on savings & temporary cash invmnts Dividends & interest from securities	9100	1,222.			
97 1	Net rental income or (loss) from real estate:					
a (debt-financed property					
Ьr	not debt-financed property.	 				
98 N	let rental income or (loss) from pers prop	 				
99 (Other investment income.					
100 (gain or (loss) from sales of accord					
U	uler than inventory					
102 G	let income or (loss) from special events					
103 0	iross profit or (loss) from sales of inventory Other revenue: a					
Ь	and revenue, a	-				
c ¯						
d _						
e_						
104 Su	ubtotal (add columns (R) (D) and (E))		. 222			
	(and conditions (D), (D), and (E))	***************************************				
105 To	ubtotal (add columns (B), (D), and (E)) otal (add line 104, columns (B), (D), ar	nd (E))	1,222.			
ote: Lin art VII Line No.	e 105 plus line 1d, Part I, should equal Relationship of Activities to	the amount or the Accom	line 12, Part I. plishment of Exe	empt Purpose	es (See instructions.)	
lote: Lin	e 105 plus line 1d, Part I, should equal Relationship of Activities to	the amount or the Accom	line 12, Part I. plishment of Exe	empt Purpose	es (See instructions.)	
ote: Line Part VII Line No.	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos	the amount or the Accomincome is reposes (other than	plishment of Exerted in column (E) of by providing funds for	empt Purpose Part VII contribut such purposes)	es (See instructions.) ted importantly to the a	
ote: Line Part VII Line No.	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa	the amount or the Accommincome is reposes (other than	plishment of Exerted in column (E) of by providing funds for	empt Purpose Part VII contribut such purposes)	es (See instructions.) ted importantly to the a	
lote: Line Part VII Line No.	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A)	the amount or the Accomincome is reposes (other than	plishment of Exerted in column (E) of by providing funds for	Part VII contribut such purposes)	es (See instructions.) ted importantly to the a	accomplishment
ote: Line Part VII Line No. V /A art IX Name	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A)	the amount or the Accomincome is reposes (other than able Subsidial (B)	plishment of Exerted in column (E) of by providing funds for aries and Disreg	Part VII contribut r such purposes)	es (See instructions.) ted importantly to the a . s (See instructions.)	accomplishment (E)
ote: Lini art VII Line No. /A A Name pai	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A) Address, and EIN of corporation, rtnership, or disregarded entity	the amount or the Accomming income is reposes (other than able Subsidian (B) Percentage of ownership interes	plishment of Exerted in column (E) of by providing funds for aries and Disreg	Part VII contribur such purposes) arded Entitie	es (See instructions.) ted importantly to the a	(E)
ote: Line Part VII Line No. /A art IX Name pai	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A)	the amount or the Accomming income is reposes (other than able Subsidiants) Percentage of ownership interes 60.000	plishment of Exerted in column (E) of by providing funds for aries and Disregated (C) Nature of act of INTERNET NEW	Part VII contribur such purposes) arded Entitie	es (See instructions.) ted importantly to the a . S (See instructions.) (D) Total	(E) End-of-year assets
ote: Line Part VII Line No. A A A Name pai ORLDNE	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A) Address, and EIN of corporation, rtnership, or disregarded entity	the amount or the Accomming income is reposes (other than able Subsidian (B) Percentage of ownership interes 60.000	plishment of Exerted in column (E) of by providing funds for aries and Disregated (C) Nature of act of INTERNET NEW	Part VII contribur such purposes) arded Entitie	es (See instructions.) ted importantly to the a . s (See instructions.) (D) Total income	(E) End-of-year assets
lote: Line Part VII Line No. /A Name pai ORLDNE	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A) , address, and EIN of corporation, rtnership, or disregarded entity TDAILY.COM OR	the amount or the Accomming income is reposes (other than able Subsidian (B) Percentage of ownership interes 60.000	aries and Disreg	Part VII contributer such purposes) arded Entities ctivities	es (See instructions.) ted importantly to the a . s (See instructions.) (D) Total income 0.	(E) End-of-year assets
lote: Line Part VII Line No. V /A art IX Name pai DRLDNE	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A) , address, and EIN of corporation, rtnership, or disregarded entity TDAILY.COM OR	in the amount or or or the Accomming income is reposes (other than able Subsidian (B) Percentage of ownership interes 60.000	aries and Disreg	Part VII contribute such purposes) arded Entitie ctivities	es (See instructions.) ted importantly to the a . s (See instructions.) (D) Total income 0.	(E) End-of-year assets
lote: Line Part VII Line No. V /A art IX Name pai DRLDNE	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A) , address, and EIN of corporation, rtnership, or disregarded entity TDAILY.COM OR	in the amount or or or the Accomming income is reposes (other than able Subsidian (B) Percentage of ownership interes 60.000	aries and Disreg	Part VII contribute such purposes) arded Entitie ctivities	es (See instructions.) ted importantly to the a . s (See instructions.) (D) Total income 0.	(E) End-of-year assets
lote: Line Part VII Line No. /A art IX Name pai ORLDNE	Relationship of Activities to Explain how each activity for which of the organization's exempt purpos Information Regarding Taxa (A) Address, and EIN of corporation, rtnership, or disregarded entity TDAILY. COM OR Information Regarding Tran e organization, during the year, receive any funds	able Subsidi (B) Percentage of ownership interes 60.000	aries and Disregate Nature of action INTERNET NEI	Part VII contribuir such purposes) arded Entitie ctivities	es (See instructions.) ted importantly to the a . S (See instructions.) (D) Total income 0. Ontracts (See instructions.)	(E) End-of-year assets (Control of the control of t
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Schedule A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust Supplementary Information — (See separate instructions.)

Supplementary Information — (see separate instructions)

Must be completed by the above organizations and attached to their Form 990 or 990-EZ.

2001

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the Organization Employer Identification Number WESTERN CENTER FOR JOURNALISM 68-0260052 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions. List each one. If there are none, enter 'None.') (d) Contributions to employee benefit plans & deferred (a) Name and address of each (b) Title and average (c) Compensation (e) Expense employee paid more than \$50,000 hours per week account and other devoted to position allowances compensation Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions. List each one (whether individuals or firms). If there are none, enter 'None.') (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation Total number of others receiving over \$50,000 for professional services.

Sche	dule	A (Form 990 or 990-EZ) 2001 WESTERN CENTER FOR JOURNALISM 68-026005	2	F	age 2
Par	t III	Statements About Activities (See instructions.)		Yes	No
1	to ir	ing the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid incurred in connection with the lobbying activities			
		est equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		Х
	Orga	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other anizations checking 'Yes,' must complete Part VI-B and attach a statement giving a detailed description of the bying activities.			
	Duri sub taxa ben	ing the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any stable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal eficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.) SEE STATEMENT 6	2a		Χ
a	Salt	e, excitatinge, of leasing of property:			
b	Len	ding of money or other extension of credit?	2b		X
С	Furr	nishing of goods, services, or facilities?	2c		X
d	Pay	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X	
е	Trai	nsfer of any part of its income or assets?	2e		X
		es the organization make grants for scholarships, fellowships, student loans, etc? (See Note below.)you have a section 403(b) annuity plan for your employees?			X
Note	: Att	ach a statement to explain how the organization determines that individuals or organizations receiving loans from it in furtherance of its charitable programs 'qualify' to receive payments.			
Par					
me o	Ť	nization is not a private foundation because it is (please check only One applicable box): A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6	Н	A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7	Н	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8		A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).			
9		A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's	name,	city,	
10		and state An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section (Also complete the Support Schedule in Part IV-A.)	170(b)	(1)(A)	, (iv).
11 a		An organization that normally receives a substantial part of its support from a governmental unit or from the general p. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	oublic.		
116	\Box	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
	□		4		-4-
12	<u>N</u>	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	f its su	pport	pts
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports orga described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) section 509(a)(3).)	ınizatio). (See	ons B	
		Provide the following information about the supported organizations. (See instructions.)			
		(a) Name(s) of supported organization(s)	(b) Li	ne nu	mber
		(a) Name(3) of supported organization(3)	fror	m abo	ve
14		An experiention experiend and experted to test for public patch. Seating 500(a)(4), (See instructions.)			
<u>14</u>	\perp	An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)			

Sche	dule A (Form 990 or 990-EZ) 2001	WESTERN CEN	ITER FOR JOURN	ALISM	68-026005	2 Page 3
Part	IV-A Support Schedule (Complete only if you	checked a box on line	10, 11, or 12.) Use ca	ash method of accoun	nting.
Note:	You may use the worksheet in th	e instructions for con-	verting from the accru	al to the cash method	of accounting.	
Caler begin	ndar year (or fiscal year	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	455,943.	660,742.	401,119.	368,848.	1,886,652.
16	Membership fees received					
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc, purpose					
18	Gross income from interest, dividends, amounts received from payments on securities loans (Section 512(a)(5)), rents, royalties, and unrelated business taxable income (less Section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,153.	448.	361.	235.	<u>3,197.</u>
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.	-		,		, .
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	458,096.	661,190.	401,480.	369,083.	1,889,849.
	Line 23 minus line 17	458,096.	661,190.	401,480.	369,083.	1,889,849.
	Enter 1% of line 23	4,581.	6,612.	4,015.	3,691.	
				olumn (e), line 24	N/A. ► 26a	
	Prepare a list for your records to show the supported organization) whose total gifts return. Enter the total of all these excess a	name of and amount contr for 1997 through 2000 excee	ibuted by each person (othe ded the amount shown in li		or publicly with your	
c	Total support for Section 509(a)(column (e)		> 26c	
ď	Add: Amounts from column (e) for	or lines: 18		19		
_	Add: Amounts from column (e) for	22		26b	26d	
	Public support (line 26c minus lin	ne 26d total)			≥ 26e	
	Public support percentage (line 2					%
	Organizations described on line		ou by mile zee (delient			
	For amounts included in lines 15, name of, and total amounts receisuch amounts for each year:	. 16, and 17 that were	received from a 'disc n, each 'disqualified p	ualified person,' preperson.' Do not file this	are a list for your reco s list with your return.	ords to show the Enter the sum of
	(2000)	(1999)	0. (1998)	0	(1997)	0
	oFor any amount included in line 1 show the name of, and amount m \$5,000. (Include in the list organi computing the difference between (the excess amounts) for each year.	17 that was received feceived for each year zations described in land the amount received ear:	rom each person (oth , that was more than ines 5 through 11, as d and the larger amou	er than 'disqualified p the larger of (1) the a well as individuals.) D int described in (1) or	ersons'), prepare a lis mount on line 25 for the no not file this list with (2), enter the sum of the	t for your records to the year or (2) the your return. After these differences
	(2000)0.	(1999)	0_(1998)_	0	<u>.</u> (1997)	0.
c	(2000) 0 . Add: Amounts from column (e) fo	or lines: 15 _ 20	1,886,652.	16 21	27 c	1,886.652.
	17 I Add: Line 27a total	0. a	nd line 27b total		0. 27d	0.
e	Public support (line 27c total min	us line 27d total)			► 27e	1,886,652.
f	Total support for section 509(a)(2	2) test: Enter amount	from line 23, column	(e) ▶ 27f 1	,889,849.	
ç	Public support percentage (line	27e (numerator) divid	ed by line 27f (denom	inator))	▶ 27g	99.83 %
	Investment income percentage (line 18, column (e) (nu	ımerator) divided by l	ine 27f (denominator)) ► 27h	0.17 %
	Unusual Grants: For an organizatist for your records to show, for nature of the grant. Do not file the	ation described in line each year, the name	10, 11, or 12 that rec	eived any unusual gra	ints during 1997 throu	gh 2000, prepare a
BAA			TEEA0403L 12/31/01		Schedule A (Form	990 or 990-EZ) 2001

		60052	P	age 4
Par	Private School Questionnaire (See instructions.) (To be completed Only by schools that checked the box on line 6 in Part IV)	N/A		
			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	*********	*************
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	. 30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe; if 'No,' please explain. (If you need more space, attach a separate statement.)			
	Does the organization maintain the following:			
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
1	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32ь		
,	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
	d Copies of all material used by the organization or on its behalf to solicit contributions?			
	If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:	-		
	a Students' rights or privileges?.	33a		
1	b Admissions policies?.	33b		
,	c Employment of faculty or administrative staff?.	33c		•
	d Scholarships or other financial assistance?	33d		
,	e Educational policies?	33e		
1	f Use of facilities?.	33f		
,	g Athletic programs?	33g		
	h Other extracurricular activities?	33h		
	If you answered 'Yes' to any of the above, please explain. (If you need more space, attach a separate statement.)			
		-		
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34a		
	b Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered 'Yes' to either 34a or b, please explain using an attached statement.			
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation	35	***************************************	
	TEEANANI DOPENI Schedule A (F	orm 990 or 9	90-F7	2001

WESTERN CENTER FOR JOURNALISM

68-0260052

Page 5

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions) Did the reporting organization directly or indirectly engage in any of the following with any other organization described in set of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting organization to a noncharitable exempt organization of: (i) Cash.		
a Transfers from the reporting organization to a noncharitable exempt organization of: (i) Cash. (ii) Other assets. b Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization. (ii) Purchases of assets from a noncharitable exempt organization. (iii) Rental of facilities, equipment, or other assets. (iv) Reimbursement arrangements. (v) Loans or loan guarantees. (vi) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	on 50	
a Transfers from the reporting organization to a noncharitable exempt organization of: (i) Cash. (ii) Other assets. b Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization. (ii) Purchases of assets from a noncharitable exempt organization. (iii) Rental of facilities, equipment, or other assets. (iv) Reimbursement arrangements. (v) Loans or loan guarantees. (vi) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	_	(c)
(ii) Other assets. b Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization. (ii) Purchases of assets from a noncharitable exempt organization. (iii) Rental of facilities, equipment, or other assets. (iv) Reimbursement arrangements. (v) Loans or loan guarantees. (vi) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	Ye	
b Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization. (ii) Purchases of assets from a noncharitable exempt organization. (iii) Rental of facilities, equipment, or other assets. (iv) Reimbursement arrangements. (v) Loans or loan guarantees. (vi) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	<u> </u>	<u> </u>
(i) Sales or exchanges of assets with a noncharitable exempt organization. (ii) Purchases of assets from a noncharitable exempt organization. (iii) Rental of facilities, equipment, or other assets. (iv) Reimbursement arrangements. (v) Loans or loan guarantees. (vi) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	i)	
(ii) Purchases of assets from a noncharitable exempt organization (iii) Rental of facilities, equipment, or other assets (iv) Reimbursement arrangements (v) Loans or loan guarantees (vi) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees c		١
(iii) Rental of facilities, equipment, or other assets. (iv) Reimbursement arrangements. (v) Loans or loan guarantees. (vi) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. c		X
(iv) Reimbursement arrangements. (v) Loans or loan guarantees. (vi) Performance of services or membership or fundraising solicitations. b c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. c		
(v) Loans or loan guarantees b (vi) Performance of services or membership or fundraising solicitations b c Sharing of facilities, equipment, mailing lists, other assets, or paid employees c	ii)	<u> </u>
(vi)Performance of services or membership or fundraising solicitations	v)	⊥ × ـ
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		<u> </u>
	<u>/i)</u>	X
d If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair market with the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value of the goods, other assets, or services received:	_ــــ	X
	lue of e in	
(a) (b) (c) (d) Line no. Amount involved Name of noncharitable exempt organization Description of transfers, transactions, and sharing		ents
N/A		
		-
Aga - As		
		,
52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	Yes [No.
(a) (b) (c) Name of organization Type of organization Description of relationship		
N/A		
	·	
BAA TEEA0406L 09/25/01 Schedule A (Form 990	r 990-E	Z) 200

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No. 1545-0047

Employer Identification Number Name of Organization 68-0260052 WESTERN CENTER FOR JOURNALISM Organization type (check one): Section: Filers of: 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the general rule or a special rule. (Note: Only a Section 501(c)(7), (8), or (10) organization can check box(es) for both the general rule and a special rule - see instructions.) General Rule -|X||For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.) Special Rules -For a Section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.) For a Section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. (Complete Parts I, II, and III.) For a Section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc, purpose. Do not complete any of the Parts unless the general rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more duing the year.).....

Caution: Organizations that are not covered by the general rule and/or the special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but must check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Schedule	B (Form 990, 990-EZ, 990-PF) (2001)		Page 1	to 1	of Part I
Name of Org	RN CENTER FOR JOURNALISM		1	Identification Nu 260052	mber
Part I	Contributors (see instructions)		,		
(a) Number	(b) Name, address and ZIP + 4		(c) Aggregate contributions		(d) contribution
1	SIEBENS FOUNDATION 400 THIRD AVENUE CALGARY, ALBERTA CANADA	S _	200,000.	noncash	Part II if there is contribution.)
(a) Number	(b) Name, address and ZIP + 4		(c) Aggregate contributions		(d) contribution
<u>2</u>	PACIFIC SECURITY TRUST P.O. BOX 3170 HONOLULU, HI 94802-3170	_ _s_	10,000.	Person Payroll Noncash (Complete F noncash	Part II if there is contribution.)
(a) Number	(b) Name, address and ZIP + 4		(c) Aggregate contributions		(d) contribution
		S_		Person Payroll Noncash (Complete F noncash	Part II if there is contribution.)
(a) Number	(b) Name, address and ZIP + 4		(c) Aggregate contributions		(d) contribution
				Person Payroll Noncash (Complete F noncash	Part II if there is contribution.)
(a) Number	(b) Name, address and ZIP + 4		(c) Aggregate contributions		(d) contribution
		s _		Person Payroll Noncash (Complete F noncash	Part II if there is contribution.)
(a) Number	(b) Name, address and ZIP + 4		(c) Aggregate contributions		(d) contribution
		_ _s_		Person Payroll Noncash (Complete F noncash	Part II if there is contribution.)
BAA	TEEA0702L 01/02/02		Schedule B (Form	990, 990-EZ,	990-PF) (2001)

Name of Organ			1	tification Number
	CENTER FOR JOURNALISM		68-0260	U32
Part II	Noncash Property			
(a) No. from Part I	(b) Description of noncash property given	FMV (or (see ins	(c) estimate) tructions)	(d) Date received
· <u>.</u> , .		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV (or (see ins	(c) estimate) tructions)	(d) Date received
		S		
(a) No. from Part I	(b) Description of noncash property given	FMV (or (see ins	(c) estimate) tructions)	(d) Date received
		\$		L
(a) No. from Part I	(b) Description of noncash property given	FMV (or (see ins	(c) estimate) tructions)	(d) Date received
				-
		\$		
(a) No. from Part I	(b) Description of noncash property given	I FMV (or	(c) estimate) tructions)	(d) Date received
		\$ _		
(a) No, from Part I	(b) Description of noncash property given	FMV (or (see ins	(c) estimate) tructions)	(d) Date received
			•	
		s		
BAA] Sche	dule B (Form	n 990, 990-E	 Z, or 990-PF) (200 1

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Page 1 to 1

of Part II

	(Form 990, 990-EZ, or 990-PF) (2001)			Page I	to 1 o	f Part III			
	CENTER FOR JOURNALISM				Employer Identification Nur 68 - 0260052	nber			
Part III	Exclusively religious, charitable,	etc., individual contributi	ons to sec	tion 501(c)(7), (8), or (10)				
.	organizations aggregating more t					e entry.)			
less for the	ations completing Part III, enter total of exclination once — see inst	usively religious, charitable, etc. ructions)	, contributions	s of \$1,000 o	►\$				
(a) No. from	(b)	(c)		(d)					
Part I	Purpose of gift	Use of gift		Description of how gift is held					
	(e) Transfer of gift								
	Transferee's name, addres	Rela	Relationship of transferor to transferee						
		·							
(a)	(b)	(c)			(d)				
No. from Part I	Purpose of gift	Use of gift		Description of how gift is held		eld			
						÷			
	(e) Transfer of gift								
	Transferee's name, addres	Rela	Relationship of transferor to transferee						
(a) No. from	(b)	(c)		_	(d)				
Part I	Purpose of gift	Use of gift		Desc	ription of how gift is he	eld 			
	(e) Transfer of gift								
	Transferee's name, addres	Rela	Relationship of transferor to transferee						
ŀ									
	A)								
(a) No. from	(b) Purpose of gift	(c) Use of gift		Desc	(d) ription of how gift is he	ηų			
Part I					gittis ite				
ŀ									
		(a)							
	(e) Transfer of gift								
	Transferee's name, addres	Relationship of transferor to transferee							
ŀ									
BAA		TEEA0704L 12/31/01	Schee	dule B (Form	1 990, 990-EZ, or 990-P	F) (2001)			

2001	01 FEDERAL STATEMENTS				
	68-0260052				
STATEMENT 1 FORM 990, PART II, LINE 43 OTHER EXPENSES		.,			
BANK CHARGES CONTRACT LABOR DUES AND PUBLICATIONS INSURANCE INVESTIGATIVE REPORTING JANITORIAL LIBRARY LICENSE AND FEES MEALS AND ENTERTAINMENT MEDIA SERVICES MISCELLANEOUS PERSONAL PROPERTY TAX SECURITY	(A) (B) (C) PROGRAM MANAGEMENT SERVICES & GENERAL 3,740. 3,740. 370. 1,286. 1,286. 2,187. 284,697. 284,697. 1,150. 2,385. 35. 1,209. 1,267. 1,267. 538. 538. 234. 234. 915. TOTAL \$\frac{\$300,013}{\$300,013}\$. \$\frac{\$300,013}{\$300,013}\$. \$\frac{\$500}{\$300,013}\$.	FUNDRAISING S 0.			
STATEMENT 2 FORM 990, PART IV, LINE 57 LAND, BUILDINGS, AND EQUIPM CATEGORY FURNITURE AND FIXTURES IMPROVEMENTS	ACCUM. Y BASIS DEPREC. \$ 43,151. \$ 21,847. \$ 8,000. 383.	7,617.			
	TOTAL \$ 51,151. \$ 22,230. \$	28,921.			
STATEMENT 3 FORM 990, PART IV, LINE 58 OTHER ASSETS SECURITY DEPOSIT	<u>\$</u> TOTAL <u>\$</u>	1,815. 1,815.			
STATEMENT 4 FORM 990, PART IV, LINE 65 OTHER LIABILITIES PAYROLL TAXES PAYABLE		8,425. 8,425.			

2001 FEI	FEDERAL STATEMENTS				PAGE 2			
CLIENT 5000 WESTE	VESTERN CENTER FOR JOURNALISM				68-0260052			
3/21/02					01:53PM			
STATEMENT 5 FORM 990, PART V LIST OF OFFICERS, DIRECTORS, TRUS		٠.						
NAME AND ADDRESS	TITLE AND AVERAGE HOU PER WEEK DEVO	JRS	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER			
JAMES SMITH 5601 ZORAN COURT SACRAMENTO, CA 95841	EXECUTIVE DIR 50	REC \$	72,000.	\$ 0.	\$ 0.			
JOHN M. ROUX 3620 AMERICAN RIVER DR., #260 SACRAMENTO, CA 95864	DIRECTOR 15		0.	0.	0.			
AUDREY SMITH 5601 ZORAN COURT SACRAMENTO, CA 95841	DIRECTOR 50		23,040.	0.	0.			
	Т	TOTAL <u>\$</u>	95,040.	<u>\$ 0.</u>	<u>\$ 0.</u>			
STATEMENT 6 SCHEDULE A, PART III, LINE 2 TRANSACTIONS WITH TRUSTEES, DIRECTORS, ETC.								
WAGES FOR SERVICES RENDERED								
					,			
				•				